## IL DEPT OF TRANSPORTATION DIVISION OF TRAFFIC SAFETY ACCUMULATED TOTALS

# **City Summary**

Selection Criteria: 1/1/2007 thru 12/31/2007

NUMBER OF CRASHES

INJURY SEVERITY

		NOWIDER OF CIVACITES						INVOICE OF A PLANT				
	TOTAL	FATAL	IN II IDV	PROPERTY	TOTAL	TOTAL	TOTAL			0	0	
San Jose	TOTAL	FATAL	INJURY	DAMAGE	VEHICLES	KILLED	INJURED	A	В	С	0	
WEATHER CONDITION		•		•	•	•		•			_	
Clear		0	1	0	2	0	3	0	1	2	5	
TOTALS	1	0	1	0	2	0	3	0	1	2	5	
TYPE OF CRASH												
Rear end	1	0	1	0	2	0	3	0	1	2	5	
TOTALS		0	1	0			3				5	
CLASS OF CITY												
0 TO 2,500	1	0	1	0	2	0	3	0	1	2	5	
TOTALS	1	0	1				3				5	
ROAD SURFACE CONDITION												
Wet	1	0	1	0	2	0	3	0	1	2	5	
TOTALS		0									5	
CLASS OF TRAFFICWAY												
State Numbered Rural	1	0	1	0	2	0	3	0	1	2	5	
TOTALS		0					3				5	
DAY OF WEEK	•	•	•		_	•	·	•	-	_		
Wednesday	1	0	1	0	2	0	3	0	1	2	5	
TOTALS		0					3				5	
TIME OF DAY	•	•	•	•	_	•	· ·	· ·	-	_	·	
7 AM	1	0	1	0	2	0	3	0	1	2	5	
TOTALS		0									5	
LIGHT CONDITION	•	· ·	•	Ū	-	·	·	·	•	_	Ū	
Daylight	1	0	1	0	2	0	3	0	1	2	5	
TOTALS		0									5	
2042 255070	1	U	1	U	2	U	3	U	1	2	ð	
ROAD DEFECTS No Defects	1	0	1	0	2	0	3	0	1	2	5	
TOTALS												
	1	0	1	0	2	0	3	0	1	2	5	
TRAFFIC CONTROL	4	0	4	0	0	0	0	0	4	0	_	
Stop Sign/Flasher TOTALS	1	0	1	0	2	0	3	0	<u> </u>		5	
	1	0	1	0	2	0	3	0	1	2	5	
ROADWAY FEATURE		•	4	•	•	^	•	•		^	-	
Not Applicable		0	1	0	2	0	3	0	1		5	
TOTALS	1	0	1	0	2	0	3	0	1	2	5	

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NUMBER OF CRASHES

INJURY SEVERITY

San Jose	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	А	В	С	0
VEHICLE DEFECTS No Defect	2	0	2	0	2	0	3	0	1	2	5
TOTALS	2	0	2				3				5
<b>VEHICLE TYPE</b> Passenger	1	0	1	0	1	0	3	0	1	2	1
Van/Mini-Van	1	0	1	0	1	0	0	0	0	0	4
TOTALS		0	2			0	3				5

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NUMBER OF CRASHES INJURY SEVERITY

					PROPERTY	TOTAL	TOTAL	TOTAL				
San Jose		TOTAL	FATAL	INJURY	DAMAGE	VEHICLES	KILLED	INJURED	Α	В	С	0
DRIVER CONDITION												
Normal		2	0	2	0	2	0	0	0	0	0	2
TOTALS			0	2			0	0			<u> </u>	2
DRIVER AGE/GENDER												
25-29	Male	1	0	1	0	1	0	0	0	0	0	1
30-34	Female	1	0	1	0	1	0	0	0	0	0	1
TOTALS			0	2			0 -	0		<u> </u>	<u> </u>	2
PASSENGER AGE/GENDER												
3	Male	1	0	1	0	1	0	0	0	0	0	1
10-14	Female	1	0	1	0	1	0	0	0	0	0	1
	Male	1	0	1	0	1	0	0	0	0	0	1
20	Male	1	0	1	0	1	0	1	0	0	1	0
25-29	Male	1	0	1	0	1	0	1	0	0	1	0
30-34	Male	1	0	1	0	1	0	1	0	1	0	0
TOTALS		6	0	6		6		3	0	1 -	2	3